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FEC FORM 2 STATEMENT OF CANDIDACY



14 JAN 28 PM 1: 47

	1.0					
(a) Name of Candidate (in full) THOMAS COTTON						
THOMAS COTTON (b) Address (number and street)	☐ Check if address changed			2. Candidate's FEC Identification Number		
PO BOX 379	Oneok ir addiess Changed			S4AR00103		
(c) City, State, and ZIP Code				, K 11	New Amended	
DARDANELLE	[5.0% 0	AR 728		COLU	(N) OR (A)	
Party Affiliation REPUBLICAN PARTY	5. Office Sought Senate		6. State & Dis	strict of Candidate 00		
					<u></u>	
DE	SIGNATION OF F	PRINCIPA	L CAMPAIG	N COMMITTEE		
7. I hereby designate the following nar	ned political committee a	is my Principa	l Campaign Com	mittee for the 2014 (year of el	election(s).	
NOTE: This designation should be f	iled with the appropriate	office listed in	the instructions.		•	
(a) Name of Committee (in full) COTTON FOR SEN	ATE					
(b) Address (number and street) P.O. BOX 379					- %	
(c) City, State, and ZIP Code						
DARDANELLE			AR	72834		
I hereby authorize the following name candidacy. NOTE: This designation should be fit (a) Name of Committee (in full)				mmittee, to receive and e	expend funds on behalf of my	
SCOTT COTTON D	AINES VICTOR	Y FUND	(SCDVF)			
(b) Address (number and street) 901 N WASHINGTON ST SUIT	E 700					
(c) City, State, and ZIP Code				 		
ALEXANDRIA			VA	22314		
I certify that I have exar	nined this Statement and	to the best o	f my knowledge a	and belief it is true, correc	at and complete.	
Signature of Candidate				Date	•	
THOMAS COTTON				01/20/2014		
NOTE: Submission of false, erroneous,	or incomplete information	n may subject	the person signir	ng this Statement to pena	alties of 2 U.S.C. §437g.	
			1		FEC FORM 2 (REV. 02/2009)	

FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)			***	Page 2 /
	OTHER AUTHORIZE			[ADDITIONAL]
I hereby authorize the following named committee, which is NOT candidacy.	my principal campaign committ	ee, to	receive and expend funds	on behalf of my
NOTE:This designation should be filed with the princip	al campaign committee.			
(a) Name of Committee (in full) FISCAL CONSERVATIVE MAJO	RITY FUND			
(b) Address (number and street) 228 S WASHINGTON STREET SUITE 115	- 10 m (10 m)			
(c) City, State and ZIP Code				
ALEXANDRIA	VA		22314	
	OTHER AUTHORIZE			[ADDITIONAL]
I hereby authorize the following named committee, which is NOT candidacy.	my principal campaign committ	ee, to	receive and expend funds	on behalf of my
NOTE:This designation should be filed with the princip.	al campaign committee.			
(a) Name of Committee (in full)				W
FRIENDS FOR AN AMERICAN M	IAJORITY			
(b) Address (number and street) 228 S WASHINGTON ST STE 115				
(c) City, State and ZIP Code			·	
ALEXANDRIA	VA		22314	
	OTHER AUTHORIZE			[ADDITIONAL]
I hereby authorize the following named committee, which is NOT candidacy.	my principal campaign committe	e, to r	receive and expend funds	on behalf of my
NOTE: This designation should be filed with the principal	al campaign committee.			
(a) Name of Committee (in full)				
(b) Address (number and street)		<u> </u>		
(c) City, State and ZIP Code				

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